

## Montana Office of Public Instruction Title I Permission Form

Dear Parent and/or Guardian:

Your child \_\_\_\_\_ has been selected to participate in the Title I Program this school year. This means that your child will receive additional instruction in the following area(s): \_\_\_\_\_. This instruction is provided by a Title I Teacher, and it will take place individually or in small groups. This extra help will supplement the regular classroom instruction, and it will include additional teaching materials and equipment. Your child will receive this instruction in addition to what is provided in the regular classroom.

Since you are an important part of this program, you will be invited to attend meetings and conferences to become better acquainted with the program and your child's success.

Please complete the bottom part of the sheet and return to the Title I or regular classroom teacher. If you have any questions, please contact any of the people listed below.

Sincerely yours,

Title I Teacher _____	Phone _____
Classroom Teacher _____	Phone _____
Principal _____	Phone _____
Title I Coordinator _____	Phone _____

### TITLE I PROGRAM PARTICIPATION FORM

I have read the above letter concerning the Title I program.

Child's Name \_\_\_\_\_ Grade \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

- ☐ I give permission for my child to receive Title I services.
- ☐ I do not give permission for my child to receive Title I services.